

SHRIMP BAITING LICENSE APPLICATION South Carolina Department of Natural Resources

Social Security No. _____

Name _____

Mailing Address _____

City/State/Zip _____

County _____ Telephone _____

Drivers License No. _____ State _____

Date of Birth _____ Sex (M) (F) Race _____

I understand that persons whose recreational privileges are suspended are not eligible to apply for, hold, or use SCDNR recreational licenses, permits, stamps, or tags.

Signature _____ Date _____

Please complete the above information, sign and return with the appropriate fee to the mailing address above.

Note: Applications with incomplete information will not be processed and will be returned to the applicant.

Residents: Submit \$25.00 check or money order payable to SCDNR with application. (Non-residents, \$500.00 Cashiers Check or Money Order only.)

SCDNR License Office:

PO Box 11710

Columbia, SC 29211

(803) 734-3833

